10-720 116

·								Application or Docket Number .					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									\ a 7 ·	. ^	116		
17/129													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS		21			•		RATE	FEE]	RATE	FEE	
FC	OR .		NUMBER FILED .		NUMBER EXTRA			BASIC FEE 385.00		OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	U minus 20=		• (XS 9=		OR	X\$18=	18	
INE	EPENDENT C	LAIMS	7	inus 3 =	9	9		X43=		OR	X86≠		
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									L	J U	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL ENTITY			SMALL		
AMENDMENTA	480	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	- 2	T	- 2		X\$ 9=		OR	XS36	100	
ME	Independent	. 4	Minus	•••	3	- /	3.9	X43=		OR	X850	200	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM	لبلا	1	+145=		OR	+290=		
I	J.M				•		L	TOTAL			TOTAL ADDIT, FEE	300	
П	201	(Column 1)		(Colum	nn 21	(Column 3)	A	DOIT. FEE		,	ADOII. PEE		
		CLAIMS		HIGH	ST	100.12.707	Г		ADDI-			ADDI-	
ENT 8		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE ·	TIONAL		RATE	TIONAL FEE	
AMENDMENT	Total	• 26	Minus	- 23		= 3·		X\$ 9=		OR	X\$18=	150,60	
AME	Independent	• 5 NTATION OF MU	Minus	ENDENT		<u>-</u>	g t	X43=		OR	X86=		
_	Thorrical	THE STATE OF THE	CIIPCE DEF	ENDENT				+145=		OR	+290=		
								TOTAL		OR	TOTAL	150.00	
		(Caluma 1)		10 a b	- 01	(Osl 0)	AE	DOT. FEE		,	ADDIT. FEE	/	
T	•	(Column 1) CLAMS		(Column HIGHE		(Column 3)	_		1				
AMENDMENT C		REMAINING AFTER AMENDMENT	•	NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	a.k		=	Γ	X\$ 9=		OR	X\$18=		
ij.	Independent		Minus	***		=	上	X43=			X86=		
`	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM.		· -			OR			
• H	the entry in color	nn 1 is less than the	antor in only	mn 2 wate 1	Me to ~~*		Ŀ	145=		OR	+290=		
₩	the 'Highest Nun	iber Previously Pai	d For IN THIS	S SPACE IS	less than	20. enter "20."	AD	TOTAL DIT. FEE	·	OR A	TOTAL DOTT. FEE]	
T	he Highest Number	nber Previously Paid ber Previously Paid	For (Total or	o orace is Independer	ress that It) is the	n 3, emer "3." highest number	found	I bi the app	ropriate box	in colu	ma 1.	1	